

01-08-2008 14:42

From-

T-165 P.006/032 F-537

**PASSAIC VALLEY SEWERAGE COMMISSIONERS
APPLICATION FOR A SEWER USE PERMIT**

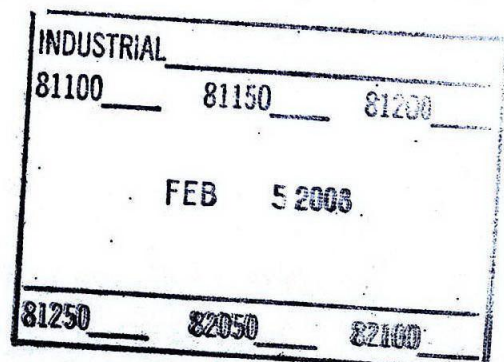
*to Murray
4/28/08*

SECTION A

1. Company Name: YANKEE LINER INC.
2. Permit Number if applicable: 27405752 - 27220009
3. Location: 63 Second Ave
Paterson, N.J. Zip Code: 07514
4. Mailing Address: 63 Second Ave
Paterson, N.J. Zip Code: 07514
5. Person to contact concerning information provided in this application:
Name of Contact Official: Robert Cucciniello
Title: President Phone No.: 973 278-1225
Address: 63 Second Ave Paterson N.J. Zip code: 07514
6. Number of Employees - Full Time: 80 Part Time: 8
Number of Work Days Per Year: 313
Number of Shifts Per Day: 2
7. If property is owned indicate block and lot number(s): Block 4044- Lot 12

Assessed Value: 64,000
8. If property is rented indicate name and address of owner:
h/n
- Total square feet rented: _____
9. List NJPDES Permit Number if applicable: h/n and
Name of receiving Body of Water entered _____

*Spoke w/ Bob Cucciniello -
No change in process operation
since Appl. submitted.
Reviewed draft permit - no change
for 4/28/08*



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SECTION B**WATER DATA**

10. Water Source: (Circle all appropriate answers)

Purchased

Y - N

Well

Y - N

If Y, is it metered

Y - N

River

Y - N

If Y, is it metered

Y - N

11. Name of purchased water supplier:

Bozeman Valley Water

List all Account #'s: _____

12. Water Received: From Mo. 01 Yr. 07 Through Mo. 12 Yr. 07

(* Next to a figure means it is estimated).

	<u>PURCHASED</u>	<u>WELL</u>	<u>RIVER</u>	<u>TOTAL</u>
1 st Qtr.	9,873,60			
2 nd Qtr.	8,302,80			
3 rd Qtr.	7,031,20			
4 th Qtr.	10,172,80			

GRAND TOTAL 35,380,40

Report in gallons

13. Water Use and Disposition (*Next to a figure means it is estimated).

	Gallons Sanitary/Combined Sewer	Discharged Stormwater/River/ Ditch	Gallons Used Other
Sanitary service only			
Process waste water			
Cooling water			
Evaporation			
Contained in the product			
Other (describe)			

GRAND TOTAL _____

Page 2

Jan	4200	3141600	
Feb	2300	1720400	
Mar	6700	5011600	9873600
Apr	3100	2318800	
May	2100	1570800	
Jun	5900	4413200	8302800
Jul	2800	2094400	
Aug	3000	2244000	
Sep	3600	2692800	7031200
Oct	2900	2169200	
Nov	5900	4413200	
Dec	4800	3590400	10172800
		35380400	35380400

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SECTION B (continued)

14. Process wastewater which is discharged as above is metered as follows:

To the Separate Sanitary Sewer	Y <u>(N)</u>
To the Combined Sewer	<u>(Y)</u> - N
To the Storm Sewer	Y <u>(N)</u>
River or Ditch	Y <u>(N)</u>

15. Waste hauler information: List all firms and/or independent contractors used to remove process waste or sludge from this facility.

Contractor	Address	Icc #	Waste type handled
Cogeco Inc.	Riverview h.s		sludge

SECTION C**OPERATIONAL CHARACTERISTICS**16. Discharge of Industrial Waste is continuous Sometimes
or intermittent _____ each operating day.

If the discharge is intermittent, it occurs between the following hours: _____

17. Brief description of Manufacturing or other activity performed: We source
Restaurants, pizza parlors, Deli, etc. with uniforms
and linen

List SIC CODE #: _____

18. Principal Raw Materials used: Some19. Principal Products or Services: Linen

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10. Describe seasonal variations, if significant, giving dates, volumes, rates, hours, etc.

Include variations in product lines which affect waste characteristics: N/ADoes this facility shutdown for vacation(s)? no If so, is it basically the same time each year. _____ Provide dates usually shutdown _____**SECTION D****MONITORING**

1. Describe any pretreatment process or effluent monitoring system in use:

Outlet #1 Build Liquid Alkalide
Wastewater neutralizer

Outlet _____

Outlet _____

2. Sampling information:

<u>Outlet</u>	<u>Contains Industrial Waste</u>	<u>Sampler Type</u>	<u>Refrigerated</u>
<u>#1</u>	<u>Liquid sample</u>	<u>24 hour</u>	<u>Yes</u>

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SECTION D (continued)**23. Volume Information:**

<u>Outlet</u>	<u>Daily Flow (Gallons)</u>	<u>Metered (Y - N)</u>	<u>Type</u>	<u>Date</u>
1	Approx 80,000		metered in	

24. Frequency of calibration of each flow meter: _____

25. Attach plot plan of the property showing: *D. H. H. H. H.*

- (a) all existing or proposed sewer and drain lines (including outlets to a storm sewer, river or ditch);
- (b) sample point(s); Monitoring or Pretreatment Equipment; Incoming meter(s); Well meter(s); Internal meter (s); Flowmeter(s).
- (c) details of the connection(s) to the municipal (or PVSC) sewer, including the distance and direction of each connection from the nearest street intersection.

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SECTION E**ANALYSIS OF INDUSTRIAL WASTE**

6. Analysis for Industrial Waste must be a proper sample taken for each outlet.

OUTLET NO. 27405 752 2722000 9

Report to the nearest unit: XX. Except where indicated with (1) Example: 15 mg/l		Report to the nearest hundredth: 0.XX Except where indicated Example: 0.36 mg/l	
Parameter	Value	Parameter	Value
*Radioactivity (PL-1)		*Antimony (Sb)	
Total Solids	*	*Arsenic (As)	
*Volatile Solids		*Boron (B)	
Total Suspended Solids	* 53	Cadmium (Cd)	* 2.002
*Volatile Suspended Solids		*Chromium Total (Cr)	
3) SGT-HEM (EPA Method 1664 Rev. A)	* 12.4	Copper (Cu)	* .124
Biochemical Oxygen Demand (BOD)	* 398	*Iron (Fe)	
Chemical Oxygen Demand (COD)	* 590	Lead (Pb)	* .0093
		*Cyanide (CN)(3)	
*Total Organic Carbon (TOC)		Mercury (Report to 0.XXX)	* 2.0002
		Nickel (Ni)	* .0115
pH(standard unit range)	* 8-9.1	*Selenium (Se)	
(1) Ammonia as N	*	*Silver (Ag)	
(1)(3) Total Oil & Grease	* 12.2	*Tin (Sn)	
* (1) Sulfide		Zinc (Zn)	* .212
* (1) Ortho Phosphates as P		*Phenol	
* (1) Kjeldahl N as N		*Pesticides (Report to 0.XXX)	
* (2)(3) TTO (Report to 0.XXX)		*TTVO (Report to 0.XXX)(3)	

FOOTNOTES:

- (1) Report results to the nearest tenth, i.e., 1.6 mg/l.
(*) Analyze for this if reasonably expected to be present in the discharge unless otherwise exempted.
- (2) See instructions.
- (3) Grab sample required

1/87
8/89
7/90
9/94
8/95
11/95
07/98
06/98

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SECTION E (continued)

Samples collected by: maintenance personnel / Isco sampler Date: monthly 2/7/08
Sample analyzed by: Cal's Lab Date: monthly 2/7/08
Products being manufactured when sample was collected: Industrial Laundry

27. Who performs the analyses of the samples for User Charge? Cal's Lab

28. Is the Laboratory certified by NJDEP to conduct all the analyses? (Y) - N

29. Who performs the analyses of the samples for the Pretreatment Parameters? Cal's Lab

If monitoring has not commenced for Pretreatment, indicate Laboratory you plan to use. If unknown, so state:

30. Is the Laboratory certified by NJDEP to conduct all the required Pretreatment analyses?

(Y) - N

31. Based upon knowledge of materials and processes used at this facility check the appropriate box that best describes the potential that a Priority Pollutant, listed on Tables 1,2 & 3 is present in your discharge.

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SECTION FPRETREATMENT

12. Industrial Category: general Pretreatment 40 CFR 403
 Subpart (s): _____
13. Compliance date(s): _____
14. Is facility in compliance? Yes If not, and if compliance date has passed, explain actions being taken to get into compliance: _____

5. Date Baseline Monitoring Report (BMR) submitted to PVSC: By February 1, 2008 - December 31, 2007
6. Compliance schedule submitted: Yes
 If yes is facility on schedule? Yes Explain if compliance date will not be met: _____

7. Does this facility come under the Resource Conservation and Recovery Act (RCRA)?
 If yes, describe no
8. Does this facility have a Spill Prevention Control and Countermeasures (SPCC) plan?
 If yes, describe _____

9. Has NJDEP or EPA ever cited this facility for a violation of State or Federal Regulations for the nature of its wastewater discharge? Y - N
10. Is this facility under an ISRA Clean up? no If so, has a plan been approved by NJDEP: _____

- Is there any plan to discharge groundwater?
no

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CERTIFICATION*:

The information contained in this application is familiar to me and, to the best of my knowledge and belief, such information is true, complete and accurate.

If the applicant is a corporation, a corporate resolution is attached granting me the authority to sign the application on behalf of the corporation.

Name of signing official:

Robert J. Cuccinello

Print Name

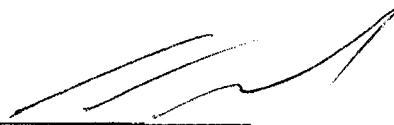
TITLE:

President

DATE

11 Feb 1988

SIGNATURE

**APPLICATION MUST BE SIGNED BY ONE OF THE FOLLOWING:**

- a. Principal Officer of Corporation
- b. President or Owner of Company
- c. General Partner if a Partnership
- d. Plant Manager or Authorized Representative

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TABLE 1 EPA PRIORITY POLLUTANTS**CHECK APPROPRIATE BOX**

NAME	A	B	C	D		A	B	C	D
Acenaphthene				✓	2,4 dimethylphenol				✓
acrolein				✓	2,4 dinitrotoluene				✓
acrylonitrile				✓	2,6 dinitrotoluene				✓
benzene				✓	1,2 diphenylhydrazine				✓
benzidine				✓	ethylbenzene				✓
carbon tetrachloride					fluoranthene				✓
tetrachloromethane)				✓	4-chlorophenyl phenyl ether				✓
chlorobenzene				✓	4-bromophenyl phenyl ether				✓
,2,4-trichlorobenzene				✓	bis(2-chloroisopropyl) ether				✓
hexachlorobenzene				✓	bis(2-chloroethoxy) methane				✓
,2 dichloroethane				✓	methylene				✓
,1,1 trichloroethane				✓	chloride(dichloromethane)				✓
hexachloroethane				✓	methyl chloride				✓
,1,dichloroethane				✓	(chloromethane)				✓
,1,2 trichloroethane				✓	methyl bromide				✓
,1,2,2 tetrachloroethane				✓	(bromomethane)				✓
chloroethane				✓	bromoform(tribromomethane)				✓
is(chloromethyl) ether				✓	dichlorobromomethane				✓
bis(2 chloroethyl) ether				✓	trichlorofluoromethane				✓
-chloroethyl vinyl ether mixed				✓	dichlorodifluoromethane				✓
-chloronaphthalene				✓	chlorodibromomethane				✓
,4,6, trichlorophenol				✓	hexachlorobutadiene				✓
parachlorometa cresol				✓	hexachlorocyclopentadiene				✓
chloroform (trichloromethane)				✓	isophorone				✓
chlorophenol				✓	naphthalene				✓
,2, dichlorobenzene				✓	nitrobenzene				✓
,3, dichlorobenzene				✓	2-nitrophenol				✓
,4, dichlorobenzene				✓	4-nitrophenol				✓
,3, dichlorobenzidine				✓	2,4-dinitrophenol				✓
,1,dichloroethylene				✓	4,6 dinitro-o cresol				✓
,2 trans-dichloroethylene				✓	N-nitrosodimethylamine				✓
,4,dichlorophenol				✓	N-nitrosodiphenylamine				✓
,2, dichloropropane				✓	N-nitrosodi-n-propylamine				✓
,3, dichloropropylene				✓	pentachlorophenol				✓
,3 dichloro propene)				✓	phenol				✓

- KNOWN TO BE PRESENT
- SUSPECTED TO BE PRESENT
- KNOWN TO BE ABSENT
- SUSPECT TO BE ABSENT

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TABLE 1 EPA PRIORITY POLLUTANTS (continued)**CHECK APPROPRIATE BOX**

NAME	A	B	C	D		A	B	C	D
bis(2-ethylhexyl) phthalate				X	endrin				X
butylbenzylphthalate				X	endrin aldehyde				X
di-n-butylphthalate				X	heptachlor				X
di-n-octylphthalate				X	heptachlor (epoxide)				X
diethylphthalate				X	BHC Alpha				X
dimethylphthalate				X	BHC Beta				X
benzo(a)anthracene				X	BHC Gamma				X
benzo(a)pyrene				X	BHC Delta				X
3,4 benzofluoranthene				X	PCB1242				X
benzo(k) fluoranthene				X	PCB1254				X
chrysene				X	PCB1221				X
acenaphthylene				X	PCB1232				X
anthracene				X	PCB1248				X
benzo(ghi)perylene				X	PCB1260				X
fluorene				X	PCB1016				X
phenanthrene				X	toxaphene				X
dibenzo (a,h) anthracene				X	antimony (total)				X
indeno (1,2,3-c,d) pyrene				X	arsenic (total)				X
pyrene				X	asbestos (fibrous)				X
tetrachloroethylene				X	beryllium (total)				X
toluene				X	cadmium (total)				X
trichloroethylene				X	chromium (total)				X
vinyl chloride				X	copper (total)				X
aldrin				X	cyanide (total)				X
dieldrin				X	lead (total)				X
chlordan				X	mercury (total)				X
1,4 DDT				X	nickel (total)				X
1,4, DDE				X	selenium (total)				X
1,4, DDD				X	silver (total)				X
endosulfan I				X	thallium (total)				X
endosulfan II				X	zinc (total)				X
endosulfan sulfate				X	2,3,7,8, tetrachlorodibenzo				X
					p-dioxin				X

1. KNOWN TO BE PRESENT
 2. SUSPECTED TO BE PRESENT
 3. KNOWN TO BE ABSENT
 4. SUSPECT TO BE ABSENT

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TABLE 2 NJDEP EXPANDED PRIORITY POLLUTANTS**CHECK APPROPRIATE BOX**

NAME	A	B	C	D		A	B	C	D
acrylamide				✓	n,n-dimethyl aniline				✓
amitrole				✓	3,3-dimethyl benzidine				✓
aryl alcohols				✓	1,1-dimethylhydrazine				✓
amine hydrochloride				✓	dioxane				✓
anisole				✓	diphenylamine				✓
aramine				✓	ethylenimine				✓
benzotrithiolide				✓	hydrazine				✓
benzylamine				✓	4,4-methylene bis				✓
					(2-chloroaniline)				✓
2-chloroaniline				✓	4,4-methylenedianiline				✓
1-chloroaniline				✓	methyl isobutyl ketone				✓
3-chloroaniline				✓	alpha-naphthylamine				✓
2-chloro-2-nitrobenzene				✓	beta-naphthylamine				✓
2-chloro-4-nitrobenzene				✓	n-methylaniline				✓
chloroprene				✓	1,2-phenylenediamine				✓
bisulfonide				✓	1,3-phenylenediamine				✓
camphene				✓	1,4-phenylenediamine				✓
3-dichloroaniline				✓	sudan 1 (solvent yellow 14)				✓
4-dichloroaniline				✓	thiourea				✓
5-dichloroaniline				✓	toluene sulfonic acids				✓
4-dichloroaniline				✓	toluidines				✓
5-dichloroaniline				✓	xylenes				✓
3-dichloropropene				✓					
3-dimethoxybenzidine				✓					

- KNOWN TO BE PRESENT
- SUSPECTED TO BE PRESENT
- KNOWN TO BE ABSENT
- SUSPECT TO BE ABSENT

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TABLE 3 EPA HAZARDOUS SUBSTANCES**CHECK APPROPRIATE BOX**

NAME	A	B	C	D		A	B	C	D
acetaldehyde				X	isopropanolamine				X
allyl alcohol				X	kelfthane				X
allyl chloride				X	kepone				X
amyl acetate				X	malathion				X
aniline				X	mercaptodimethur				X
benzonitrile				X	methoxychlor				X
benzyl chloride				X	methyl mercaptan				X
butyl acetate				X	methyl methacrylate				X
butylamine				X	methly parathion				X
captan				X	mevinphos				X
carbaryl				X	mexacarbate				X
carbofuran				X	monoethylamine				X
carbon disulfide				X	monomethylamine				X
chlorpyrifos				X	naled				X
coumaphos				X	napthenic acid				X
resol				X	nitrotoluene				X
crotonaldehyde				X	parathion				X
cyclohexane				X	phenolsulfonate				X
1,4-D (2,4-dichlorophenoxy)				X	phosgene				X
acetic acid				X	propagrite				X
diazinon				X	propylene oxide				X
dicamba				X	pyrethrins				X
dichlobenil				X	quinoline				X
dichlone				X	resorcinol				X
2-dichloropropionic acid				X	strontium				X
dichlorvos				X	strychnine				X
diethylamine				X	stryrene				X
dimethylamine				X	2,4,5-T (2,4,5-trichloro- phenoxy acetic acid)				X
nitrobenzene				X	TDE (tetrachloro- diphenylethane)				X
diquat				X	2,4,5-TP 2(2,4,5- trichlorophenoxy				X
disulfoton				X	trichlorofon				X
diuron				X	triethylamine				X
dichlorohydrin				X	trimethylamine				X
					propenoic acid				X

1. KNOWN TO BE PRESENT
 2. SUSPECTED TO BE PRESENT
 3. KNOWN TO BE ABSENT
 4. SUSPECT TO BE ABSENT

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TABLE 3 EPA HAZARDOUS SUBSTANCES (continued)**CHECK APPROPRIATE BOX**

<u>NAME</u>	<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>
hanolamine				X	uranium				X
hion				X	vanadium				X
hylene diamine				X	vinyl acetate				X
hylene dibromide				X	xylene				X
ormaldehyde				X	xlenol				X
rfural				X	zirconium				X
rhion				X					
oprene				X					

KNOWN TO BE PRESENT

SUSPECTED TO BE PRESENT

KNOWN TO BE ABSENT

SUSPECT TO BE ABSENT

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SUPPLEMENTAL SEWER USE APPLICATION QUESTIONNAIRE

The following questionnaire must be completed and submitted by all industrial and tax-exempt users making application for a SEWER USE PERMIT. The purpose of this questionnaire is to identify the correct name and address of the applicant and all individuals and entities owning 10% or more of the applicant. This will assist the PVSC by providing necessary information for service of notices, bills and other documents upon the applicant, for service of process as well as the individual to be contacted in the event of an emergency.

BY SIGNING THIS APPLICATION THE APPLICANT IS ACKNOWLEDGING ITS CONTINUING OBLIGATION TO UPDATE THE INFORMATION CONTAINED IN THIS QUESTIONNAIRE. SPECIFICALLY THE APPLICANT UNDERSTANDS THAT IT SHALL NOTIFY THE PVSC WITHIN THIRTY (30) DAYS OF ITS ENTERING INTO A CONTRACT OR AGREEMENT TO TRANSFER ITS CAPITAL STOCK AND/OR 50% OR MORE OF ITS ASSETS. THE APPLICANT SHALL LIKEWISE INFORM THE PVSC, ON A CONTINUING BASIS, OF ALL INDIVIDUALS OR ENTITIES OWNING 10% OR MORE OF THE CAPITAL STOCK OR ASSETS OF THE CORPORATION AND ANY INDIVIDUAL OR ENTITY ENTITLED TO RECEIVE MORE THAN 10% OF THE NET PROFITS OF THE APPLICANT.

FAILURE TO NOTIFY THE PVSC OF ANY CHANGES IN THE CORPORATE STRUCTURE, OWNERSHIP OR PLANNED TRANSFER OF OWNERSHIP WITHIN 15 DAYS OF ITS OCCURRENCE SHALL BE DEEMED A VIOLATION OF THE SEWER USE PERMIT, THE RULES AND REGULATIONS OF THE PVSC AND N.J.S.A. 58:14-1 et. seq.

SECTION ONE

(To be completed by all applicants)

NAME OF APPLICANT: State the complete name of the organization applying for a SEWER USE PERMIT ("Permit"), as it appears on the certificate of incorporation, charter, by-laws, partnership agreement, trust or other official document which establishes the name of the applicant (if no such document exists, state the name the business uses):

Yalkee Lira Inc.

Name of Applicant

TRADE NAME: Identify all trade names, names under which the applicant will be doing or soliciting business and/or fictitious names that the organization will utilize at the location(s) for which this Permit application is made.

Yalkee Lira Inc.

Trade Name/Fictitious Name

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BUSINESS ORGANIZATION: Please check the appropriate box:

- | | |
|---|--|
| <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Trust |
| <input type="checkbox"/> Partnership | <input type="checkbox"/> Joint Venture |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Non-Profit Corporation |
| <input checked="" type="checkbox"/> Corporation | <input type="checkbox"/> Limited Liability Company |
| <input type="checkbox"/> Other (describe) | |

MERGENCY CONTACT PERSON: In the event of an emergency, provide the name, address and telephone number of the person(s) the PVSC can contact:

Name: Robert Cucinello

Street Address: 63 Secord Ave

City, State & Zip Code: Paterson, NJ 07654

Business Telephone: 973-278-1225 Emergency Telephone: 973-278-1225

PAST NAMES OF APPLICANT. List all names under which the applicant has done business or held itself out to the public as doing business in the past. Include names of division, and "trading as," "doing business as," fictitious, or informal name.

<u>Name</u>	<u>From (Year)</u>	<u>To (Year)</u>
n/a		

APPLICANT'S FORMER FACILITIES IN NEW JERSEY. List all locations, including office, in the State of New Jersey at which the applicant formerly operated any aspect of its business, and any location at which such a business was owned or operated by any predecessor of the applicant, or by any owner, partner, director, officer, key employee or stockholder holding 10% or more of the applicant's equity.

<u>Address</u>	<u>Type of Facility</u>	<u>From To (years)</u>	<u>NJDEP regis. No. and or USEPA I.D.</u>

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APPLICANT'S FACILITIES IN OTHER JURISDICTIONS. List all locations in any state, including offices, districts or territory of the United States other than New Jersey, or in any foreign country, at which the applicant is currently operating any aspect of its business.

<u>Address</u>	<u>Telephone</u>	<u>Type of facility</u>	<u>USEPA I.D. and/or any permits (nos. and name of issuing agency)</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SECTION TWO

(To be completed only by Corporations and Limited Liability Companies)

REGISTERED AGENT: Identify the name and address of the Corporation's Registered Agent:

Name: Robert Cucinello

Company Name: Yankee Line Inc.

Street Address: 63 Second Ave

City, State & Zip Code: Camden, N.J. 08104

Telephone: 856-278-1225
(Area Code)

DATE AND PLACE OF INCORPORATION/FORMATION: Identify the state where the corporation/LLC was organized and the date on which the Certificate of Incorporation/Formation was filed:

State/Country: New Jersey - U.S.A.

Date: 1952

Certificate of Incorporation No.: _____

Copy of certificate of incorporation attached? Yes No

DATE AUTHORIZED IN NEW JERSEY: If other than a New Jersey corporation/LLC, state the date on which the corporation/LLC received a Certificate of Authority to Transact Business in New Jersey (and attach copy).

Date: N/A

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OFFICERS. List the following information as to each Officer of the corporation. Use additional copies of this section as necessary.

Name: Robert Succinello Telephone: 973-278-1225
 Business address: _____

<u>Office</u> <u>held</u>	<u>Date took</u> <u>office</u>	<u>Date of</u> <u>birth</u>
<u>President</u>	<u>1986</u>	<u>9-14-54</u>

Name: Thomas Succinello Telephone: 973-278-1225
 (area code)

Business address: _____

<u>Office</u> <u>held</u>	<u>Date took</u> <u>office</u>	<u>Date of</u> <u>birth</u>
<u>Vice President</u>	<u>1988</u>	<u>2-20-58</u>

RECTORS. List the following information as to each Director of the corporation. Use additional copies of this section as necessary.

Name: _____ Telephone: _____
 (area code)

Business address: _____

<u>Office</u> <u>held</u>	<u>Date took</u> <u>office</u>	<u>Date of</u> <u>birth</u>
_____	_____	_____

01-08-2008 14:46 From-

T-165 P.024/032 F-537

FORMER OFFICERS AND DIRECTORS: List the following information as to each person who was an Officer or Director of the corporation at any time during the last 10 years and is not listed in the responses above. Use additional copies of this section, as necessary.

Name and last known address:

Position held	From	To (month/year)	Date of birth
_____	_____	_____	_____

SECTION THREE

(To be completed only by Corporations and Limited Liability Companies)

List all persons and/or entities holding a 10% or greater ownership, equity, beneficial or other interest in the Applicant along with the addresses and telephone #. Use additional copies of this section as necessary.

Name: Robert Cuccinello

Street Address: 63 Second Ave

City, State & Zip Code: Paterson NJ 07654 Bus. Phone 973-278-1225

Name: Thomas Cuccinello

Street Address: 63 Second Ave

City, State & Zip Code: Paterson NJ 07654 Bus. Phone 973-278-1225

If any of the persons and/or entities listed above is a corporation or Limited Liability Corporation, for each such corporation provide all information requested in Section Two of this Questionnaire.

SECTION FOUR

(To be completed only by Partnerships or Joint Ventures)

Provide a copy of the partnership or joint venture agreement of applicant. hla

Copy attached? ☐ Yes ☐ No

01-08-2008 14:46 From-

T-165 P.025/032 F-537

TYPE OF ASSOCIATION: Check One☐ General Partnership ☐ Limited Partnership ☐ Joint Venture

GENERAL PARTNERS OR JOINT VENTURERS. List the following information as to each partner or joint venturer. Use additional copies of this section, as necessary. If a limited partnership, list limited partners separately under the heading "limited partners."

Name: hla

Street Address:

City, State & Zip Code:

Telephone: _____

Name:

Street Address:

City, State & Zip Code:

Telephone: _____

LIMITED PARTNERS. List the following information as to each limited. Use additional copies of this section as necessary.

Name:

Street Address:

City, State & Zip Code:

Telephone: _____

Name:

Street Address:

City, State & Zip Code:

Telephone: _____

01-08-2008 14:47 From-

T-165 P.026/032 F-537

FORMER PARTNERS/JOINT VENTURERS. List the following information as to all prior partners (general and limited) and joint venturers of the applicant during the past 10 years that are not listed above. Use additional copies of this section as necessary.

h/b

Name:

Street Address:

City, State & Zip Code:

Telephone:

Dates during which individual was a partner: _____

Name:

Street Address:

City, State & Zip Code:

Telephone: _____ Telephone _____

Dates during which individual was a partner: _____

If any of the persons and/or entities listed above is a corporation or Limited Liability Corporation, for each such corporation provide all information requested in Section Two of this Questionnaire.

SECTION FIVE

h/b

(This section to be completed only if the business concern is organized in a form other than a sole proprietorship, corporation, partnership or joint venture—such as a trust or association)

FORM OF BUSINESS ORGANIZATION: Describe how the business entity is organized and under what legal authority it was established.

Type (trust, trade association; estate; etc.)

Copy attached? _____ Yes _____ No

01-08-2008 14:47 From-

T-165 P.027/032 F-537

OWNERS, OFFICERS, TRUSTEES, CONTROLLING PARTIES, ETC. List the following information as to each person who owns, controls or is an officer or trustee of the Applicant. If any owner, officer, trustee, or controlling party listed below shall be a corporation, limited liability corporation, or partnership (general or limited liability), the Applicant shall supply the information requested in Sections Two, Three and Four as applicable. Use additional copies of this section as necessary.

Name:

Street Address:

City, State & Zip Code:

Telephone:

Name:

Street Address:

City, State & Zip Code:

Telephone:

SECTION SIX

CIVIL VIOLATIONS HISTORY

(To be completed by all applicants)

The following questions concern civil violations of environmental protection laws and regulations. In this section, the term "you" refers to the applicant identified in SECTION I, and to any of the following:

Any predecessor firm, or any previous name under which the applicant operated.

Subsidiaries: Any business in which the applicant holds 25% of equity or debt liability.

Sister companies: Any business in which the applicant's parent company holds more than 10% of the equity or debt liability.

Any corporation of which the Applicant is a subsidiary.

Any Officer, Director, Partner, or Joint Venturer of the applicant, and any business concern owned or controlled by any such individual.

Provide a response in each section. Each item pertains to all of the entities and individuals listed above. If an answer is None or the item is not applicable, write "None" or "N/A". A question left unanswered will not be assumed "Not applicable" or "None" - THE FORM WILL BE DEEMED INCOMPLETE.

As used below, the term "law or regulation pertaining to protection of the environment" includes laws and regulations relating to the discharge, treatment, storage, processing, recycling or disposal of industrial waste or hazardous waste and any others relating to water and air pollution, discharge of hazardous substances and treatment of hazardous materials. It includes regulations of the Passaic Valley Sewerage Commissioners (PVSC), N.J. DEP, the U.S. EPA, the N.J. DOT, and the U.S. Department of Transportation.

01-08-2008 14:47 From-

T-165 P.028/032 F-537

A. **NEW JERSEY VIOLATIONS NOTICES.** List and explain all Summonses, Notices of Violation, Notices of Prosecution, Administrative Orders and Actions, civil complaints, settlements, Judicial or Administrative Consent Orders, or Notices of Intent to Deny or Revoke any license or permit, or similar notices, issued to you within the past 10 years by the PVSC, New Jersey Department of Environmental Protection (DEP) or United States Environmental Protection Agency. Attach additional sheets if necessary.

Name of entity cited: Y. Lee Lin Inc.

Date Issued: 2/12/2005

Address of alleged violation: 63 Second Ave Paterson, NJ

Alleged violation: _____ Type of notice: Summary

Disposition & explanation: payment schedule made

Name of issuing agency: Paterson Valley Sewerage

Docket No.: C-42-05

B. **FEDERAL VIOLATION NOTICES.** List and explain all Notices of Violation, Notices of Prosecution, Administrative Orders and Actions, civil complaints, or similar notices issued to you within the past 10 years by the U.S. Environmental Protection Agency or U.S. Department of Transportation for any alleged violation of any federal law or regulation pertaining to protection of the environment. Use additional copies of this section as necessary.

None

Name of entity cited: _____

Date Issued: _____

Address of alleged violation: _____

Alleged violation: _____ Type of notice: _____

Disposition & explanation: _____

Name of issuing agency: _____

Docket no.: _____

01-08-2008 14:47 From-

T-165 P.029/032 F-537

NEW JERSEY MUNICIPALITIES AND COUNTIES. List and explain all Notices of Violation, Notices of Prosecution, Administrative Orders and Actions, Summonses, civil Complaints, Citations of any kind, and Notices of intent to Deny or Revoke a license or permit, or any similar notices issued to you within the past 10 years by any municipality or county in the State of New Jersey, for any alleged violation of any law or regulation pertaining to the protection of the environment, other than a motor vehicle or littering offense. Use additional copies of this section as necessary. *Note*

Name of _____ Date
Municipality cited: _____ Issued: _____

Address of _____
Alleged violation: _____

Alleged violation: _____ Type of
notice: _____

Disposition &
Explanation: _____

Name of issuing agency: _____ Docket no.: _____

OTHER STATES AND FOREIGN COUNTRIES. List and explain all Notices of Violation, Notices of Prosecution, Administrative Orders and Actions, Summons, Civil Complaints, Citations of any kind, and Notices of Intent to Deny or Revoke a license or permit, or any similar notices issued to you within the past 10 years by any state other than the State of New Jersey or by any foreign country, for any alleged violation of any law or regulation pertaining to the protection of the environment, other than a motor vehicle littering offense. Use additional copies of this section as necessary. *Note*

Name of _____ Date
Municipality cited: _____ Issued: _____

Address of _____
Alleged violation: _____

Alleged violation: _____ Type of
notice: _____

Disposition &
Explanation: _____

Name of issuing agency: _____ Docket no.: _____

01-08-2008 14:48 From-

T-165 P.030/032 F-537

SECTION SEVEN**OTHER CIVIL COURT JUDGMENTS AND PENDING LITIGATION**

(To be completed by all applicants)

A. **OTHER JUDGMENTS.** List and explain all judgments of liability in excess of \$25,000 rendered against the applicant in the past 10 years, starting with the most recent. Use additional copies of this section as necessary.

n/a

Title of case:

Docket No.: _____

Name & location
of court: _____Date judgment
entered: _____Nature of
suit: _____Amt./terms of
judgment: _____

B. **PENDING SUITS.** List and explain all civil suits in which the applicant is presently involved as a party plaintiff or defendant. Include matters involving resolution before arbitration boards. Use additional copies of this section as necessary.

n/a

Title of case: _____

Docket No.: _____

Name & location
of court: _____

Date Filed: _____

Nature of
suit: _____

Status: _____

01-08-2008 14:48 From-

T-165 P.031/032 F-537

SECTION EIGHT**CRIMINAL CHARGES AND CONVICTIONS** *h/b*

(To be completed by all applicants)

List all indictments, accusations, summonses, complaints, and information against the applicant for any crime, felony, misdemeanor, disorderly persons offense, petty disorderly persons offense or criminal violation.

NOTE: You need not list convictions for any violation of Title 39 of the Revised Statutes (N.J.S.A.) or comparable motor vehicle offenses in jurisdictions other than New Jersey. Death by Auto or Vehicular homicide is considered a criminal offense and must be listed under this item.

List convictions first. Use additional copies of this page as necessary.

Name of entity
Charged/convicted: _____

Description of
Crime/offense charged: _____

Date Charged: _____ Jurisdiction
Where Charged: _____

Indictment information,
Complaint No., indictment No. etc., _____

Disposition (if applicable,
Sentence imposed): _____

01-08-2008 14:48 From-

T-165 P.032/032 F-537

CERTIFICATION

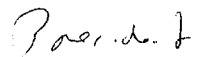
(All applicants must sign and date the
following certification)

I hereby certify the answers supplied in the foregoing SUPPLEMENTAL SEWER USE PERMIT
APPLICATION QUESTIONNAIRE are true. I am aware that if any of the foregoing responses are willfully
false, I am subject to punishment.

Dated:

1/10/08



Signature

Print Title & Position

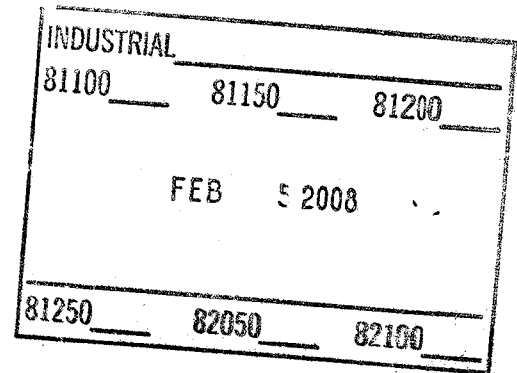


63 Second Avenue, Paterson, NJ 07514

Phone: 973-278-1225 Fax: 973-278-5145

Passaic Valley Sewerage Commission
600 Wilson Avenue
Newark NJ 07105

January 31, 2008



To Whom It May Concern:

Enclosed please find renewal application along with \$750.00 application fee. Section E Analysis of industrial waste will follow under a separate cover because we are waiting for the lab to forward our results. As soon as we receive them we will forward them to you .

If you have any questions please call me at 973-278-1225.

A handwritten signature in dark ink, appearing to be "RC" or "R. Cucciniello", written in a fluid, cursive style.

Robert Cucciniello
President



Fax

INDUSTRIAL		
81100	81150	81200
FEB 22 2008		
81250	82050	82100

63 SECOND AVENUE
PATERSON NJ 07514
Phone: 973-278-1225
Fax: 973-278-5145

To: Princeton Valley Sewerage From: Bob
 Attn: SAL Biundi Date: _____
 Fax: 973-344-1840 Pages: _____
 Re: _____ CC: _____

☐ Urgent ☒ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

•Comments:

Analysis of Industrial work
Re: Beamit

Thank you

Bob Cucinelli



Passaic Valley
Sewerage Commissioners

~Established 1902~

600 WILSON AVENUE
NEWARK, NJ 07105
(973) 344-1800
Fax: (973) 344-2951
www.pvsc.com

THOMAS J. POWELL
Chairman

ARL S. CZAPLICKI, JR.
Ice Chairman

RANK J. CALANDRIELLO
WILLIAM F. FLYNN
AN C. LEVINE
JTHONY J. LUNA
ANGELINA M. PASERCHIA
NETH R. PENGITORE
Commissioners

BRYAN J. CHRISTIANSEN
Executive Director

JAMES KRONE
Deputy Executive Director

JOSEPH FERRIERO
Chief Counsel

ANTHONY W. ARDIS
Clerk

RECEIPT

Received From YANKEE LINEN, INC.

Customer ID# 27220009 Check # 1276

Amount of Payment \$ 750.00 Date of Payment 2/5/08

A/ Violation (VIO) - Effluent _____ \$ _____

B/ Violation (VIO) - Late Report _____ \$ _____

C/ Civil Actions (LEGAL) _____ \$ _____

D/ Application Fee (AF) _____ \$ 750.00

E/ Letter of Authorization Fee (LOA) _____ \$ _____

F/ Permit Fee (PF) _____ \$ _____

G/ CID Treatment Fee (CID) _____ \$ _____

H/ Supplemental User Charge Fee (SUC) _____ \$ _____

I/ One Time Groundwater Discharge (GWD) _____ \$ _____

J/ Other (FEES) _____ \$ _____

Payment received by:

Signature Heather Card

Amount 750.00 Date 2/6/08

YANKEE LINEN, INC. OPERATING EXPENSES 63 2ND AVENUE PATERSON, NJ 07514-2003		1276
DATE <u>2/8/08</u>		55-658-212
PAY TO THE ORDER OF <u>Cape May County</u> <u>Seven Hundred Fifty Ave</u>	\$ <u>750.00</u>	DOLLARS <u>A</u>
Atlantic Stewardship Bank Montville, NJ 07045 10		MP
FOR <u>FOR</u>		110012761102120658211 1122242211

2/29/08 YANKEE LINEN - Bob C.

- ① Sign + date plot + plan
- ② Need TS, + Ammonia as N
- ③ Revise p. 2 #13
- ④ Analytical results + COC.

NJDEP Certified Laboratory No. 14964
 973-335-CALI
 FAX 973-335-0556
 E-MAIL: calilabs@earthlink.net
 WEBSITE: www.calilabs.com

COMPLETE ANALYSIS LABORATORIES INC.



1259 Route 46, Building #4/C
 Parsippany, NJ 07054-4909

Mr. Robert Cucinello
 Yankee Linen
 63 Second Ave.
 Paterson, NJ 07514

ANALYSIS REPORT

REPORT DATE: FEB.18, 2008

PROJECT NO: 813374

Lab. I.D.: 813374.1

Field I.D.: YL-0207


SAMPLE: Liquid, sampled by CALI on 2/7/08

Analysis	Method Number	Results (mg/L)	Analysis Date	Time	RLs (mg/L)	DF
BOD ₅	405.1	398	2/7/08	14:30	2.0	1
TSS	160.2	53.6	2/8/08	7:30	4.0	1
TS	160.3	57.0	2/7/08	15:00	4.0	1
NH ₃ N	350.3	1.06	2/15/08	10:00	0.1	1
COD	410.4	590	2/7/08	14:00	10.0	10

Definitions:

pH Unit, J= Compound Detected but Below MDL, RLs= Laboratory Reporting Limits,
 MDL= Method Detection Limit, DF= Dilution Factor, ND = Not Detected
 RL= MDL x DF

Approved By:


 Zvi Blank, Ph.D., CHMM
 Laboratory Director

The Standard of Excellence in Laboratory Service

Mr. Robert Cucinello
Yankee Linen
63 Second Ave.
Paterson, NJ 07514

ANALYSIS REPORT

REPORT DATE: FEB.18.2008

PROJECT NO: 813374

Lab. I.D.: 813374.2

Field I.D.: YL-0207 G

SAMPLE: Liquid, sampled by CALI on 2/7/08

Analysis	Method Number	Results (mg/L)	Analysis Date	Time	RLs (mg/L)	DF
pH	150.1	8.71	2/7/08	12:35	---	1
O&G(HCM)	1664	12.2	2/8/08	8:00	1.4	1
SQT-HCM	1664A	12.4	2/7/08	9:00	1.4	1

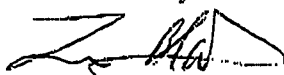
Definitions:

pH Unit, J= Compound Detected but Below MDL, RLs= Laboratory Reporting Limits,

MDL= Method Detection Limit, DF= Dilution Factor. ND = Not Detected

RL= MDL xDF

Submitted By:



Zvi Blank, Ph.D., CHMM
Laboratory Director



Mr. Robert Cucinello
Yankee Linen
63 Second Ave.
Paterson, NJ 07514

ANALYSIS REPORT

REPORT DATE: FEB.14, 2008

PROJECT NO: 813374

Lab. I.D.: 813374.1

Field I.D.: YL-0207

SAMPLE: Liquid, sampled by customer on 2/7/08

Analysis	Method Number	Results (mg/L)	Analysis Date	Time	RLs (mg/L)	DF
CADMIUM	200.7	ND(<0.002)	2/11/08	8:39	0.002	1
COPPER	200.7	0.124	2/11/08	8:39	0.003	1
NICKEL	200.7	0.0115	2/11/08	8:39	0.01	1
LEAD	200.7	0.0093	2/11/08	8:39	0.005	1
ZINC	200.7	0.252	2/11/08	8:39	0.005	1
MERCURY	245.1	ND(<0.0002)	2/13/08	8:27	0.0002	1


Definitions:

pH Unit, J= Compound Detected but Below MDL, RLs= Laboratory Reporting Limits,

MDL= Method Detection Limit, DF= Dilution Factor, ND = Not Detected

RL= MDL xDF

Submitted By:


Zvi Blank, Ph.D., CIIMM
Laboratory Director



CHAIN OF CUSTODY

COMPLETE ANALYSIS LABORATORIES, INC.

1259 ROUTE 46 BLDG. # 4
 PARSIPPANY, NJ 07054-4909
 PHONE: (973) 335-CALI
 FAX: (973) 335- 0566
 NJDEP LAB CERTIFICATION # 14964

PAGE 1 OF 1
 (Lab use only) No. 813324

DELIVERABLES: ☒ STD ☐ REDUCED ☐ FULL
 (CIRCLE ONE) OTHER (Specify) _____

CLIENT	YANKEE LINEN		
ADDRESS	63 SECOND AVE.		
CITY	PATERSON		
STATE	NJ	ZIP	07514

CONTACT	BOB CUCINELLO	PHONE	(973) 278-1225
PROJECT	WASTEWATER		
SAMPLER	name <u>Edumy</u>	sign	<u>[Signature]</u>
WITNESSED BY	name _____		

LAB ID	FIELD ID	SAMPLING DATE/TIME	M	T	No	P	ANALYSIS
813324.1	YL- 0207	2/7/08 12:25	A	G	1	C	BOD, TSS, TS
813324.1	YL- 0207	2/7/08 12:25	A	G	1	Hn, C	Cd, Ni, Zn, Cu, Pb, Hg
813324.2	YL- 0207G	2/7/08 12:30	A	G	1	C, H	SGT (Hem)
813324.1	YL- 0207	2/7/08 12:25	A	C	1	C, H	COD
813324.2	YL- 0207G	2/7/08 12:30	A	G	1	C	PH 8-7H 2201C9 121 35
813324.1	YL- 0207	2/7/08 12:25	A	C	1	C, H ₂	PH 3N
813324.2	YL- 0207G	2/7/08 12:30	A	G	1	C, H	ORC (Hem)
REMARKS							

RELINQUISHED BY		RECEIVED BY		DATE	TIME	METHOD OF RELINQUISH.	RECEIVING ORGANIZATION
NAME	SIGNATURE	NAME	SIGNATURE				
Edumy	<u>[Signature]</u>	G.M.	<u>[Signature]</u>	2/7/08	12:30	<u>[Signature]</u>	<u>[Signature]</u>
G.M.	<u>[Signature]</u>	G.M.	<u>[Signature]</u>	2/7/08	13:30		
TURNAROUND TIME:				PRIORITY AUTHORIZATION:			
M = MATRIX	A - AQUEOUS SL-SLUDGE	P - POTABLE WATER SO - SOLID	S - SOIL X - OTHER	O - OIL			
T = TYPE	C - COMPOSITE	G - GRAB	No. = NUMBER OF CONTAINERS				
P = PRESERVATIVE	H ₂ - H ₂ SO ₄	Hn - HNO ₃	H - HCl	N - NaOH	A - ASCORBIC ACID C - COOL TO 4 °C		

SOP-CG-010 REV 4/96

FOR REGULATORY COMPLIANCE



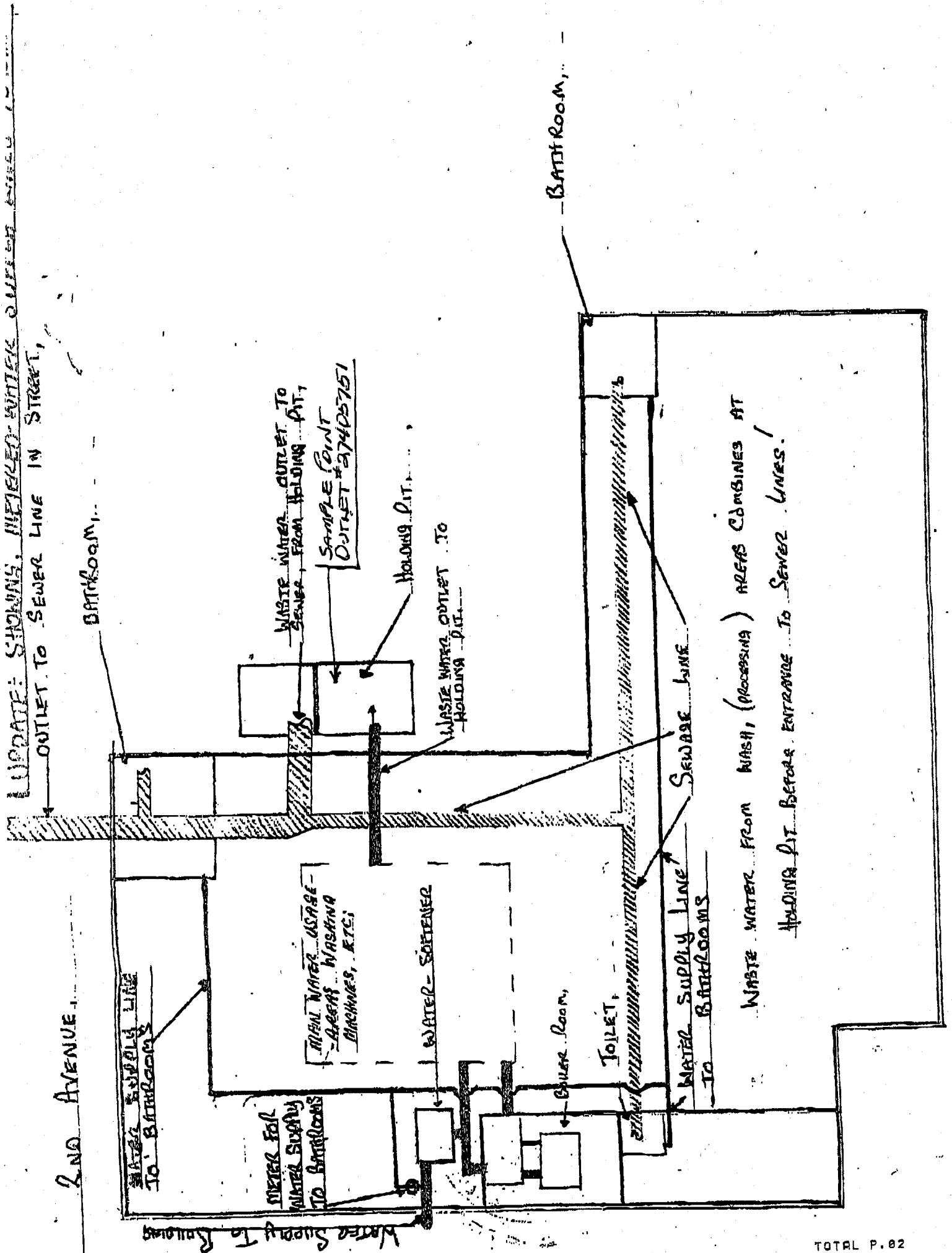
63 SECOND AVENUE
PATERSON NJ 07514
Phone: 973-278-1225
Fax: 973-278-5145

Fax

To: Passaic Valley From: Bul
Attn: Sal Biordi Date: _____
Fax: 973-344-4876 Pages: (5)
Re: _____ CC: _____

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

•Comments:



01-08-2008 14:43 From-

T-165 P.011/032 F-537

SECTION E**ANALYSIS OF INDUSTRIAL WASTE**

6. Analysis for Industrial Waste must be a proper sample taken for each outlet.

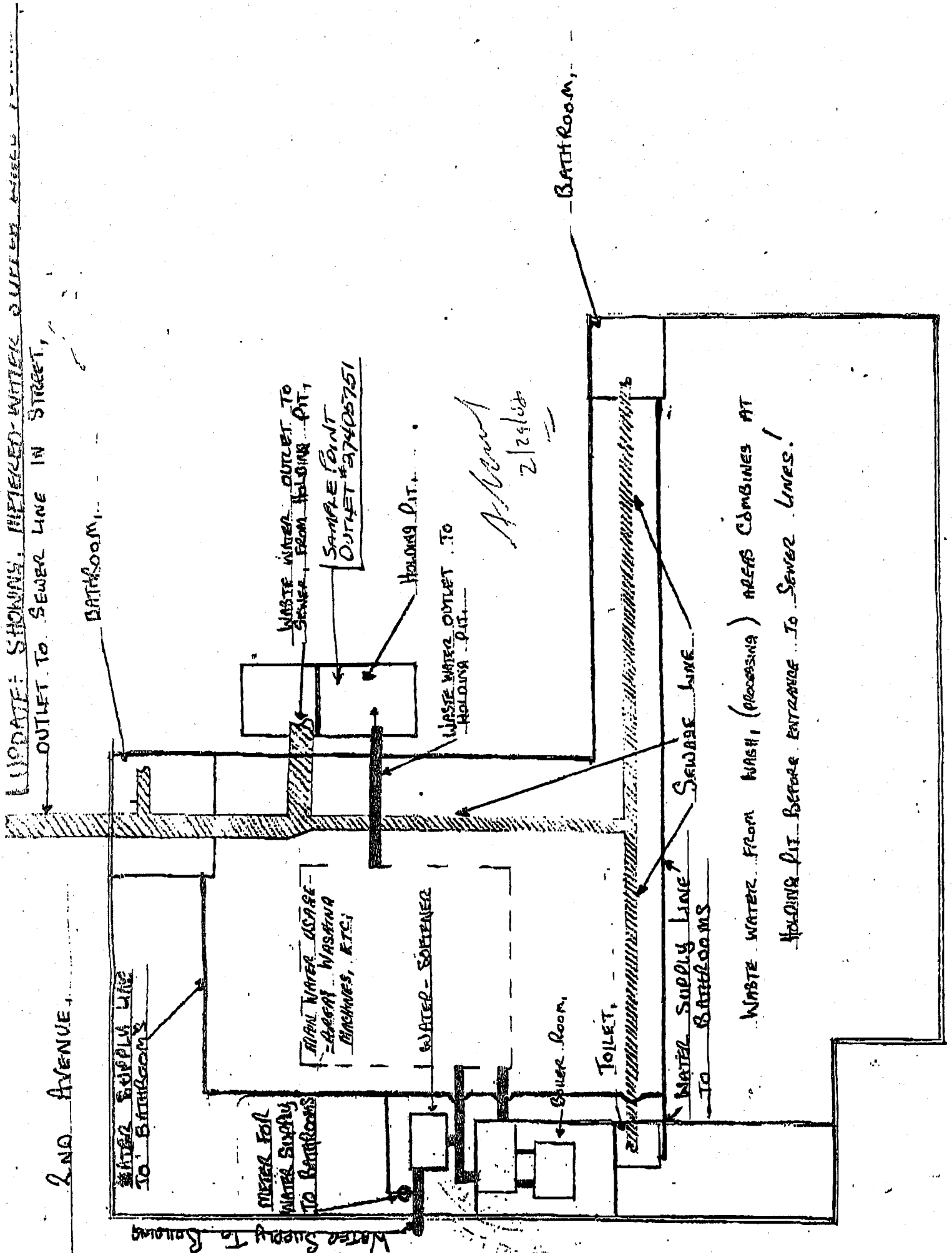
OUTLET NO. 27405 752

Report to the nearest unit: XX. Except where indicated with (1) Example: 15 mg/l		Report to the nearest hundredth: 0.XX Except where indicated Example: 0.36 mg/l	
Parameter	Value	Parameter	Value
*Radioactivity (PL-1)		*Antimony (Sb)	
Total Solids		*Arsenic (As)	
*Volatile Solids		*Boron (B)	
Total Suspended Solids	* 53	Cadmium (Cd)	* 0.002
*Volatile Suspended Solids		*Chromium Total (Cr)	
3) SGT-HEM (EPA Method 1664 Rev. A)	* 12.4	Copper (Cu)	* 0.124
Biochemical Oxygen Demand (BOD)		*Iron (Fe)	
		Lead (Pb)	* 0.0093
Chemical Oxygen Demand (COD)	* 590	*Cyanide (Cn)(3)	
*Total Organic Carbon (TOC)		Mercury (Report to 0.XXX)	* 0.0002
		Nickel (Ni)	* 0.0115
		*Selenium (Se)	
pH(standard unit range)	* 8.71	*Silver (Ag)	
(1) Ammonia as N	*	*Tin (Sn)	
(1)(3) Total Oil & Grease	* 12.2	Zinc (Zn)	* 0.212
* (1) Sulfide		*Phenol	
* (1) Ortho Phosphates as P		*Pesticides (Report to 0.XXX)	
* (1) Kjeldahl N as N			
* (2)(3) TTO (Report to 0.XXX)		*TTVO (Report to 0.XXX)(3)	

FOOTNOTES:

- (1) Report results to the nearest tenth, i.e., 1.6 mg/l.
(*) Analyze for this if reasonably expected to be present in the discharge unless otherwise exempted.
- (2) See instructions.
- (3) Grab sample required

1/87
8/89
7/90
9/94
8/95
11/95
07/98
09/95



$$\text{Flow} = 30.097 = 14,956$$

BOD

$$47.491 = 14,383.12$$

TSS

$$12,374 = 4,071.29$$

$$33,410.41$$

REPORT UEG602

PASSAIC VALLEY SEWERAGE COMMISSIONERS

PAGE: 1

DISCHARGE MONITORING REPORT

DATE: 03/06/08

MONITORING PERIOD 01-JAN-2007 TO 31-DEC-2007

27220009

YANKEE LINEN INC.
63 SECOND AVENUE
PATERSON, NJ 07514

OUTLET: 1

VOLUME (MG)	DATE	BOD (MG/L)	TSS (MG/L)	BOD (TH LB)	TSS (TH LB)
	01/04/07	263.000	101.000		
2.943	01/31/07			6.458	2.480
	AVG SAMPLE:	263.000	101.000		
	02/01/07	370.000	42.000		
1.596	02/28/07			4.927	.559
	AVG SAMPLE:	370.000	42.000		
	03/01/07	42.800	70.000		
1.592	03/31/07			.569	.930
	AVG SAMPLE:	42.800	70.000		
	04/05/07	106.000	65.000		
2.153	04/30/07			1.904	1.168
	AVG SAMPLE:	106.000	65.000		
	05/03/07	209.000	55.000		
2.162	05/31/07			3.770	.992
	AVG SAMPLE:	209.000	55.000		
	06/01/07	156.000	7.140		
1.449	06/30/07			1.886	.086
	AVG SAMPLE:	156.000	7.140		
	07/05/07	173.000	37.000		
4.193	07/31/07			6.053	1.294
	AVG SAMPLE:	173.000	37.000		
	08/02/07	354.000	33.000		
1.944	08/31/07			5.742	.535
	AVG SAMPLE:	354.000	33.000		
	09/06/07	128.000	29.000		
2.525	09/30/07			2.697	.611
	AVG SAMPLE:	128.000	29.000		
	10/04/07	223.000	22.000		
2.017	10/31/07			3.753	.370
	AVG SAMPLE:	223.000	22.000		
	11/01/07	170.000	66.000		
4.133	11/30/07			5.863	2.276
	AVG SAMPLE:	170.000	66.000		
	12/06/07	137.000	38.000		
3.385	12/31/07			3.869	1.073
	AVG SAMPLE:	137.000	38.000		

30.092 / 112 = 0.096140

OUTLET: 2

VOLUME (MG)	DATE	BOD (MG/L)	TSS (MG/L)	BOD (TH LB)	TSS (TH LB)
				47.491	12.374

REPORT UEG602

PASSAIC VALLEY SEWERAGE COMMISSIONERS

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DISCHARGE MONITORING REPORT

DATE: 03/06/08

MONITORING PERIOD 01-JAN-2007 TO 31-DEC-2007

	01/31/07	139.000	138.000		
.042	01/31/07			.049	.048
	AVG SAMPLE:	139.000	138.000		
	02/28/07	139.000	138.000		
.038	02/28/07			.044	.044
	AVG SAMPLE:	139.000	138.000		
	03/31/07	139.000	138.000		
.042	03/31/07			.049	.048
	AVG SAMPLE:	139.000	138.000		
	04/30/07	139.000	138.000		
.049	04/30/07			.057	.056
	AVG SAMPLE:	139.000	138.000		
	05/31/07	139.000	138.000		
.041	05/31/07			.048	.047
	AVG SAMPLE:	139.000	138.000		
	06/30/07	139.000	138.000		
.044	06/30/07			.051	.051
	AVG SAMPLE:	139.000	138.000		
	07/31/07	139.000	138.000		
.058	07/31/07			.067	.067
	AVG SAMPLE:	139.000	138.000		
	08/31/07	139.000	138.000		
.046	08/31/07			.053	.053
	AVG SAMPLE:	139.000	138.000		
	09/30/07	139.000	138.000		
.033	09/30/07			.038	.038
	AVG SAMPLE:	139.000	138.000		
	10/31/07	136.000	132.000		
.044	10/31/07			.050	.048
	AVG SAMPLE:	136.000	132.000		
	11/30/07	136.000	132.000		
.060	11/30/07			.068	.066
	AVG SAMPLE:	136.000	132.000		
	12/31/07	136.000	132.000		
.025	12/31/07			.028	.028
	AVG SAMPLE:	136.000	132.000		